

# Armed Forces College of Medicine AFCM



# ANTERIOR ABDOMINAL WALL



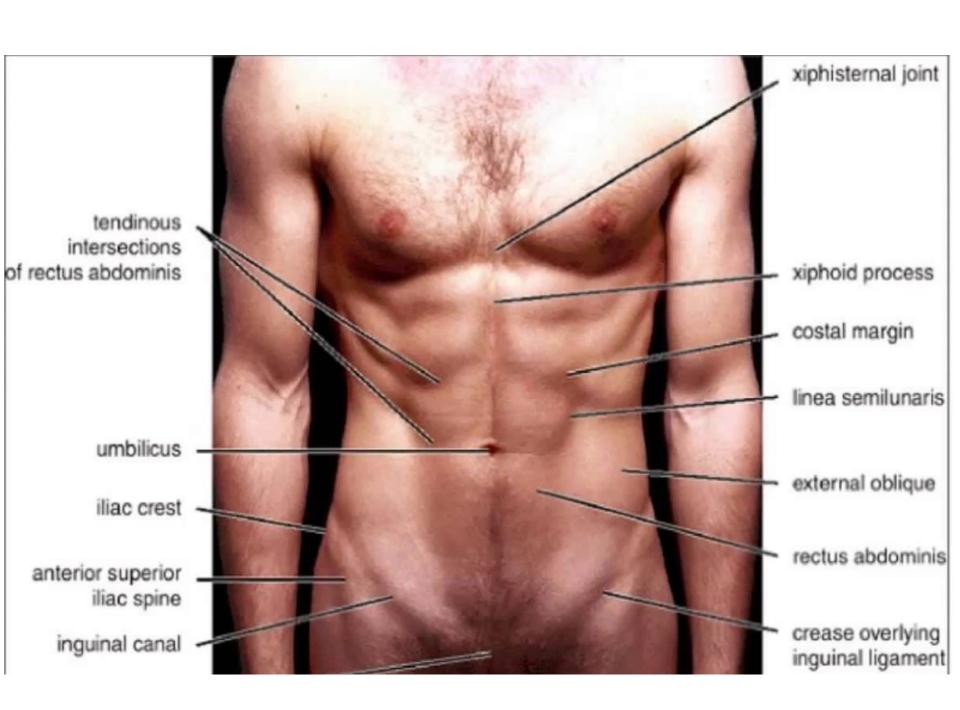


## INTENDED LEARNING OBJECTIVES (ILO)

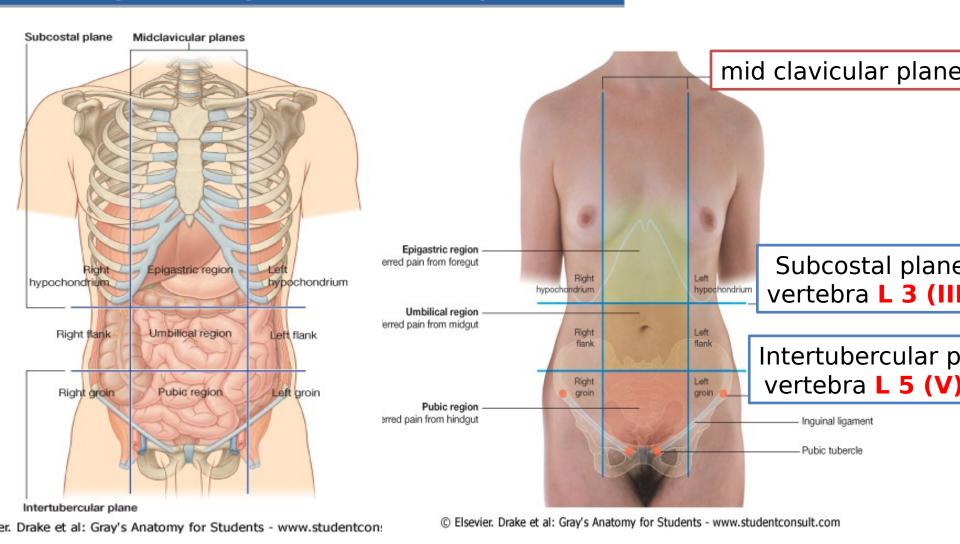
By the end of this lecture the student will be able

## to:

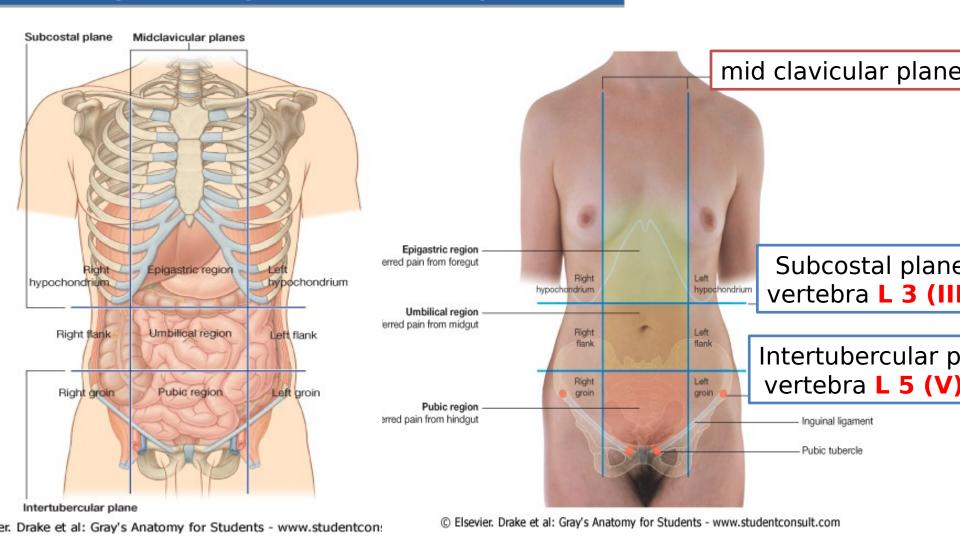
- 1. List the layers of the abdominal wall
- 2. List muscles forming anterior abdominal wall
- 3. Describe the attachments & actions of the muscles
- 4. Describe the motor and sensory nerves of the anterior abdominal wall
- 5. Describe formation of the rectus sheath and list



## ine-region organizational pattern



## ine-region organizational pattern

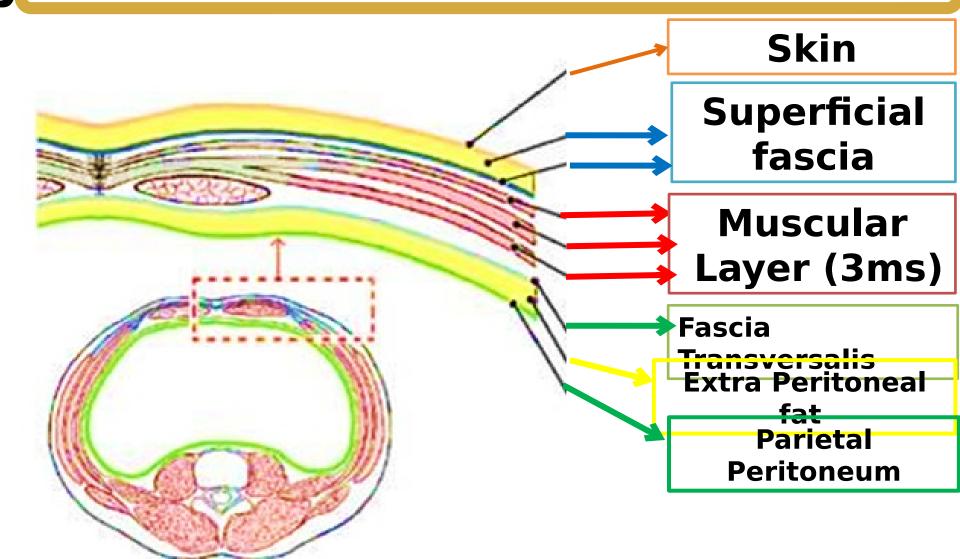


## Abdomen

## **Coverings:**

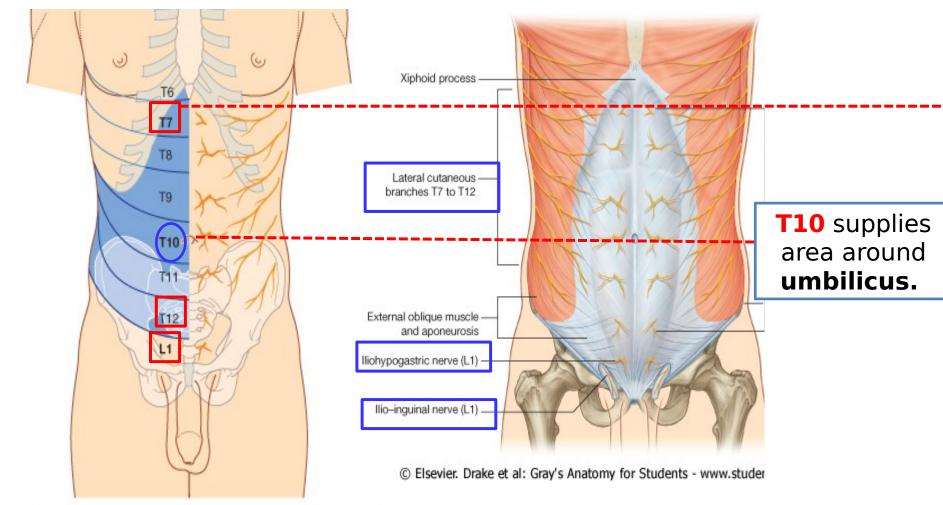
- 1-Skin.
- 2- Superficial fascia (*No Deep Fascia*).
- 3- Muscle layer.
- 4- Fascia transversalis.
- 5- Extra peritoneal fat.

## vers of Anterior Abdominal W



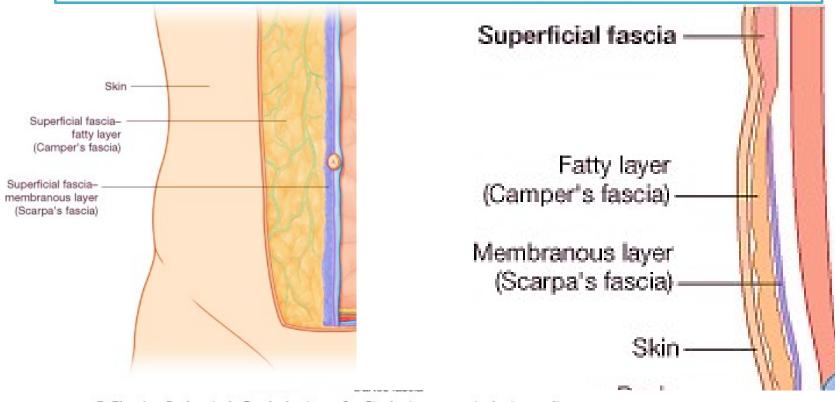
#### **Innervation**

The skin and muscles of the anterolateral abdominal wall are supplied by T7 to T12 and L1 spinal nerves



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## Superficial fascia



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No deep fascia in ant. abd. Wall because deep

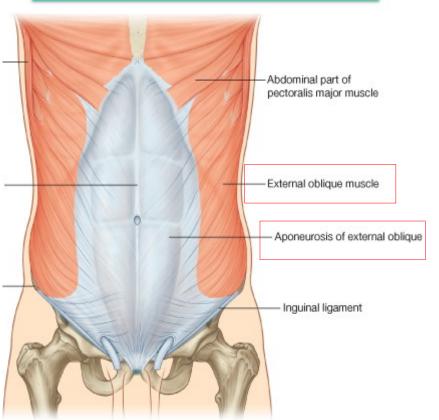
**Below umbilicus**, superficial fascia is formed of 2 layers:

- 1. superficial fatty layer Camper's fascia
- 2. deep membranous laver Scarpa's fascia



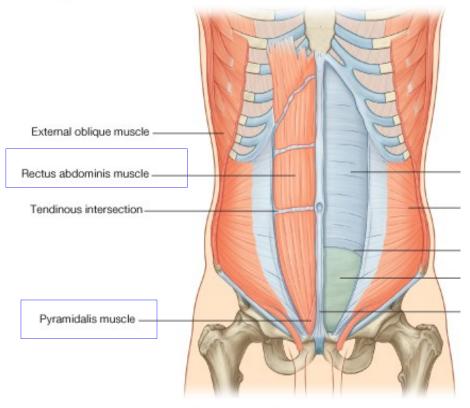
# Muscles of anterior abdominal wall

#### three flat muscles



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#### two vertical muscles



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# Muscles of anterior abdominal wall

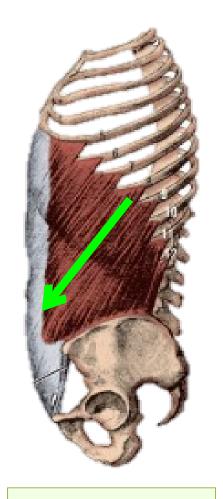
#### three flat muscles

- ☐ External
- InternalOblique
- ☐ Transversus Abdominis

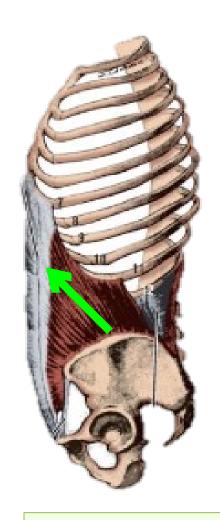
#### two vertical muscles

- ☐ Rectus abdominis
- Pyramidalis
- Two muscles lie close to midline
- Invested by sheath

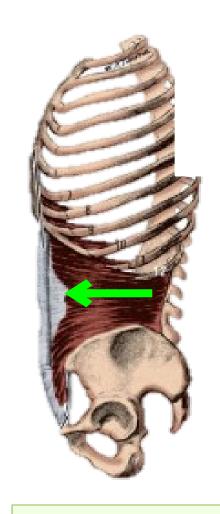
- 3 large & broad muscles
- lie on anterolateral aspect of abdomen
- Insertion by flat apenerosis to linea alba







Internal Oblique



**Transversus abdominis** 

Fibers run in three different directions to strengthen the anterior abdominal wall.

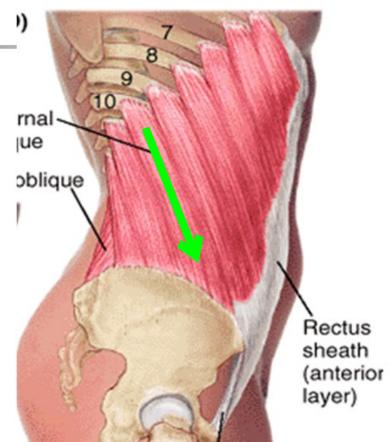
## External Oblique Muscle.



## Origin:

From the outer surfaces of the lower eight ribs.

 The direction of fibers pass down, forwards & medially



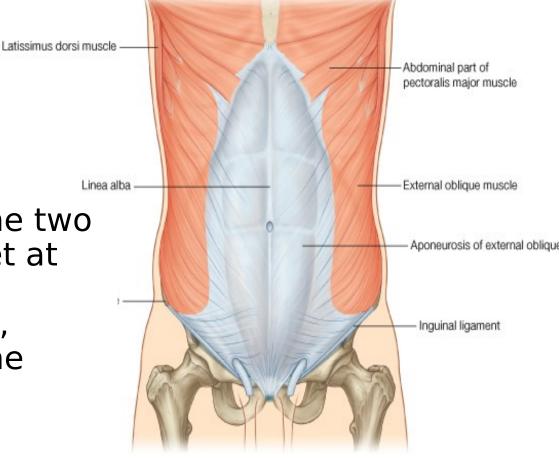
## External Oblique Muscle.

## insertion

## Aponeuroses

 The aponeuroses of the two external obliques meet at the midline

forming the linea alba, which extends from the xiphoid process to the symphysis pubis.

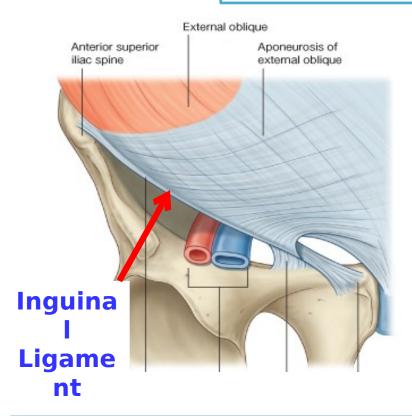


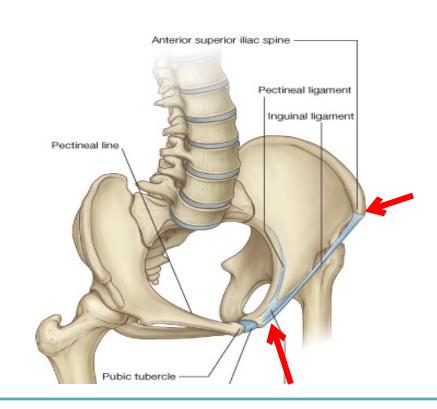
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 The aponeuroses pass infront of rectus abdominus

#### External Oblique Muscle.

## **Inguinal Ligament**



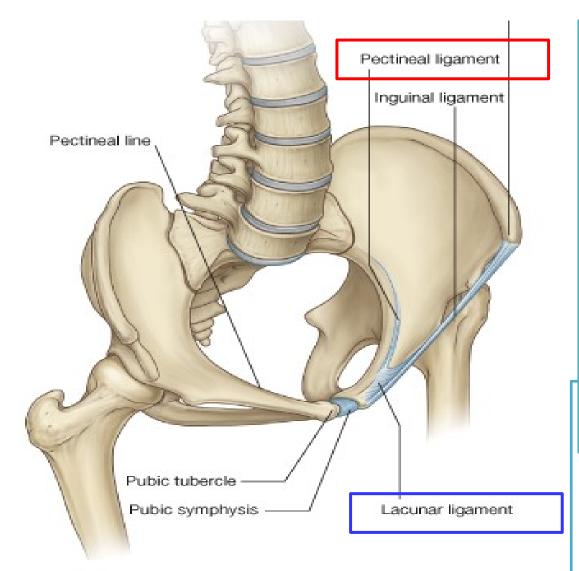


The lower border of the external oblique aponeurosis is folded backwards on itself to

## The inguinal ligament is attached

Medially : pubic tubercle

## er ligaments extend from the inguinal ligamen



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# Pectineal ligament: (Cooper's lig.)

It is a lateral extension from posterior part of lacunar ligament & attaches to pectineal line

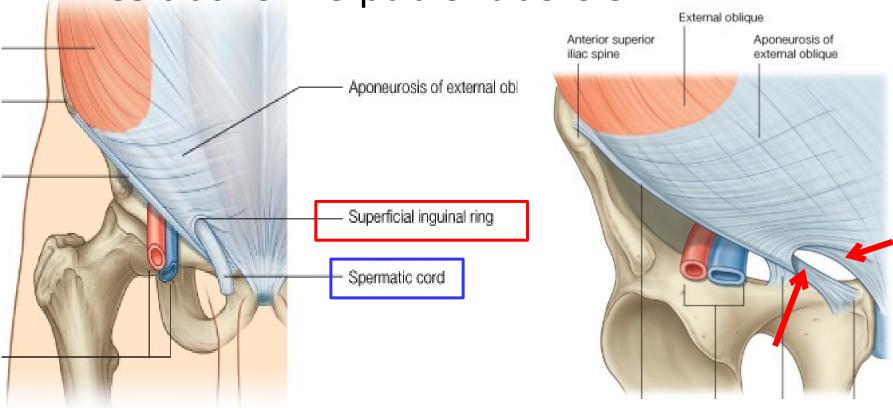
#### <del>Ligament:</del>

It is a triangular extension from the medial end of inquinal ligament.

## **Superficial Inguinal Ring**

☐ It is a triangular opening in external oblique aponeurosis.

☐ It lies above the pubic tubercle

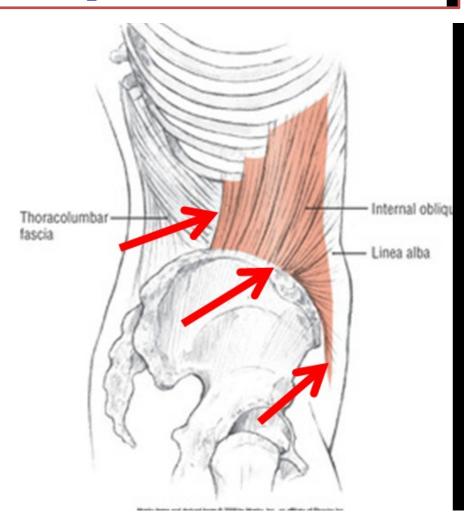


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lateral & medial crura of the

## Origin:

- a linear origin from the lateral 2/3 of the inguinal ligament
- anterior 2/3 of intermediate line of iliac crest
- from the lumbar fascia



## **Insertion**

lower 6 costal cartilages

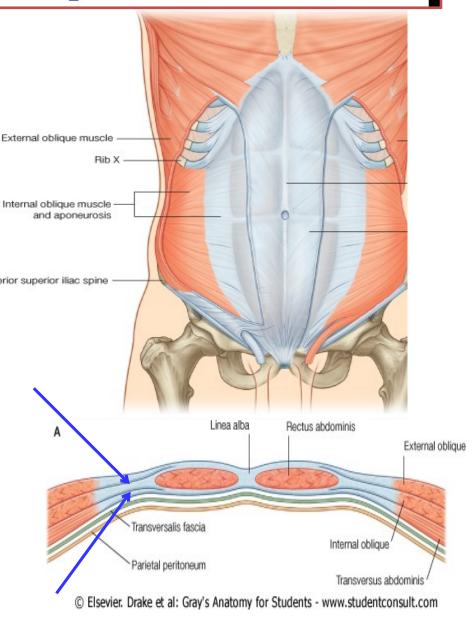
Aponeurotic insertion Approximation Superior Illac Spine
 xiphoid process,
 linea alba& pubic
 crest.

The middle part of the internal oblique aponeurosis

aponeurosis

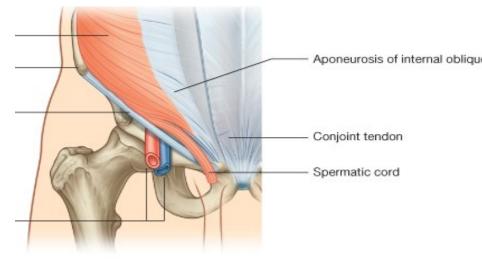
□splits into 2 lamina

□ surround rectus



## **Insertion** [

- lower 6 costal cartilages
- Aponeurotic insertion
   : xiphoid process,
   linea alba& pubic
   crest.
- its lower fibers form an arch ends in pubic crest

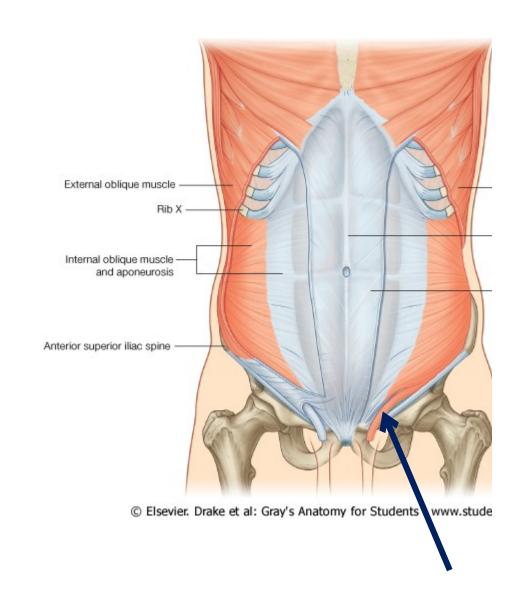


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# CREMASTERIC MUSCLE

- Origin: from lower fibers of internal oblique [] fibers around spermatic cord.
- Insertion:

   Loops return
   up tendon
   in pubic
   tubercle.



## Transversus Abdominus

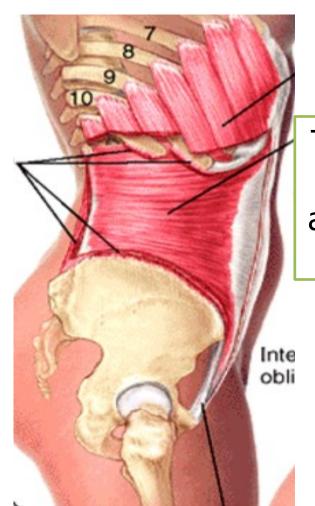
## origin [

Costal cartilages of lower six ribs (ribs 7 to 12).

Lateral one-third of inguinal ligament.

Thoracolumbar fascia. Medial lip of iliac crest (ant.2/3).

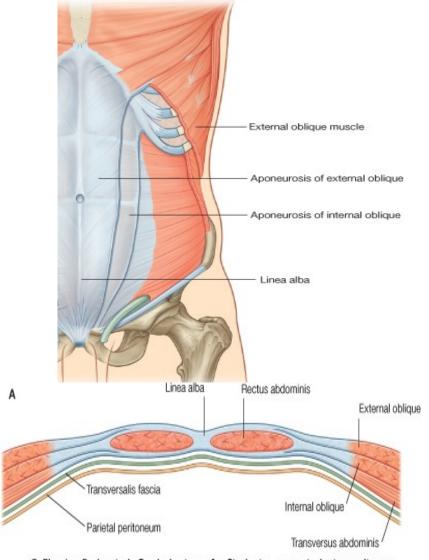
Most fibers pass in a transverse direction



Transvers us abdominu s

## Transversus Abdominus

-broad aponeurosis into xiphoid process, linea alba, pubic crest and pectineal line.



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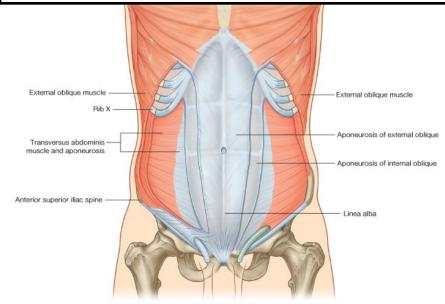
#### Transversus Abdominus

The lower fibers of internal oblique and transversus abdominus ms. form an arch over the spermatic cord (the arch of transversus abd. Is higher than that of internal obliq.)

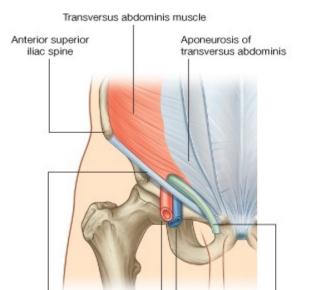
Both archs fuse together medially to form Conjoint



## **Conjoint Tendo**

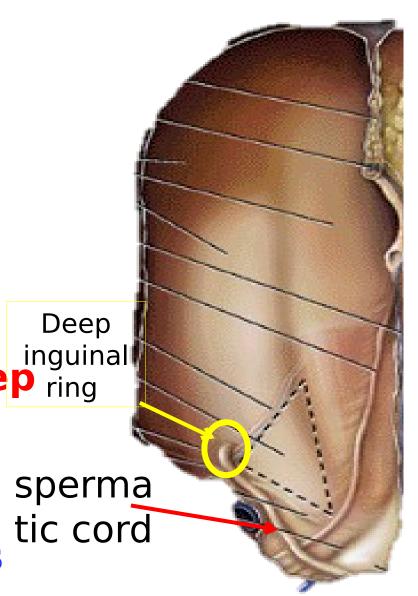


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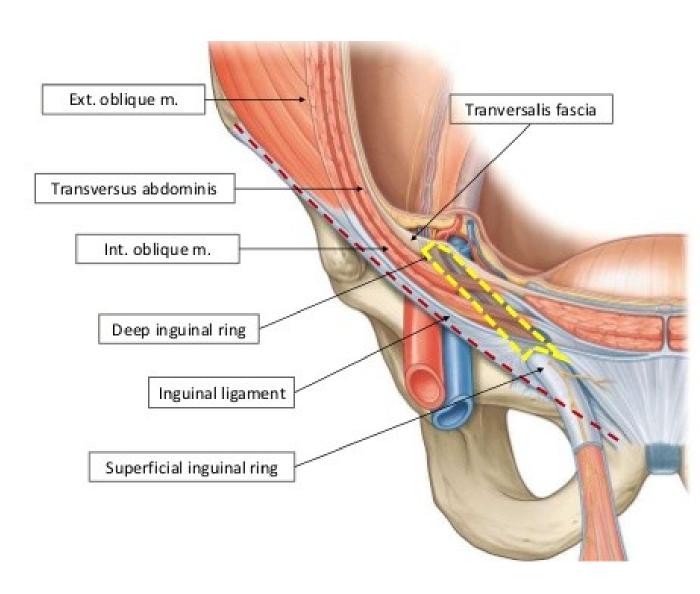


## Fascia Transversalis:

- A thin membranous fascia deep to the transversus abdominis
- It is well defined in the inguinal region
- Above the level of the inguinal ligament, there is around opening called Deep inguinal ring
- This ring transmits the spermatic cord in males



## Fascia Transversalis:



## Rectus Abdominus Muscle

**Position:** lie on to either sides of midline.

Has 3-4 tendinous intersections.



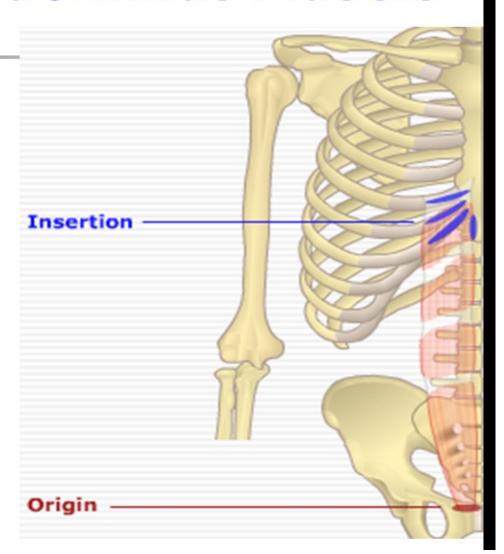
## Rectus Abdominus Muscle

### Origin:

Pubic crest, Pubic tubercle

#### Insertion:

Costal cartilages of ribs 5 to 7 and xiphoid process.





#### **Rectus abdominis**

The lateral border of the rectus muscles assumes a convex shape that gives rise to the surface landmark, the <u>Linea</u>

<u>Semilunaris</u>.





#### **PYRAMIDALIS**

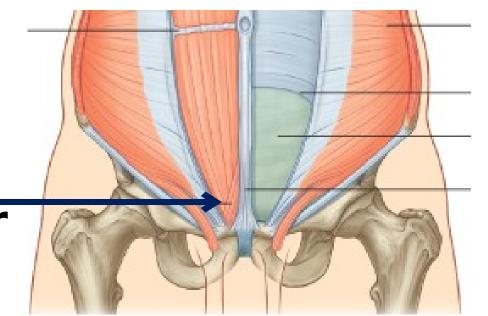
☐This muscle may be absent (18%) on one or both sides

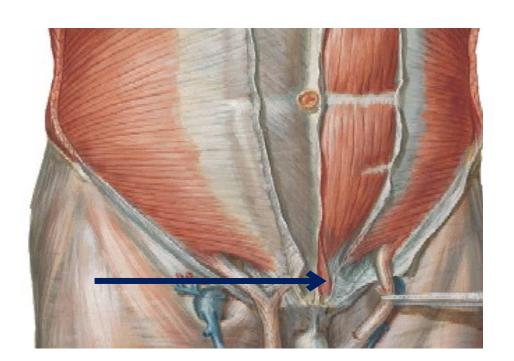


Front of pubis

□Insertion:

Linea alba

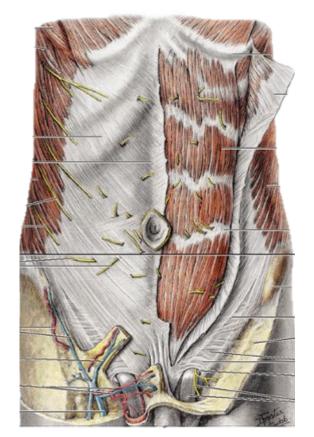


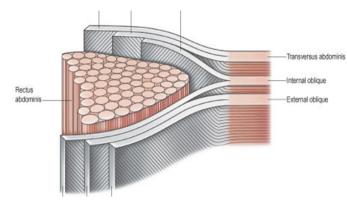




The rectus abdominis and Pyramidalis muscles are enclosed in an aponeurotic tendinous sheath (the <u>Rectus Sheath</u>) formed by a unique layering of the aponeuroses of the external and internal oblique, and transversus abdominis muscles

The part of the envelope in front of the rectus muscle is the *anterior wall* while the part behind the muscle is the

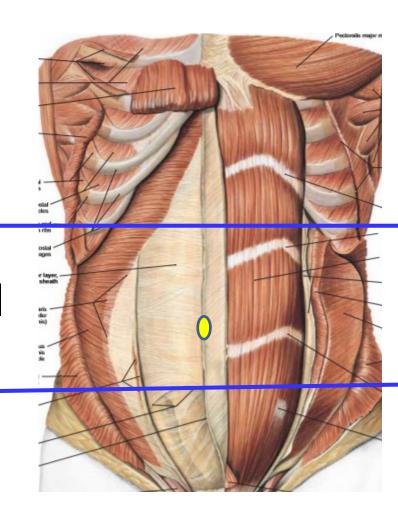






**zones 1.** above costal margin.

zones 2. between costal margin & a line midway between umbilicus & symphysis pubis.



**zones 3.** below the midway level --- []till

•

<u>zon</u>

<u>e</u>

Rectus abdominis

External oblique muscle

(a)

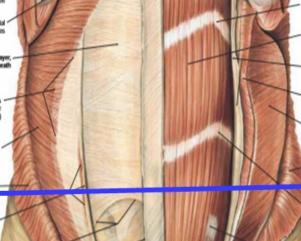
Xiphoid

6th and 7th costal cartilages



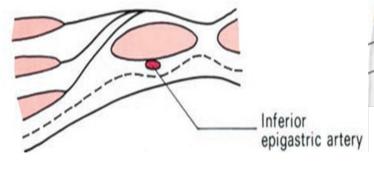
<u>zon</u>

<u>e</u> 2



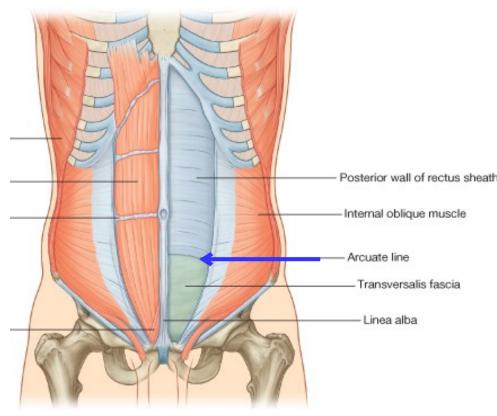
<u>zon</u>

<u>e</u> 3





The aponeurotic post. wall of rectus sheath ends at a line mid way between umbilicus & symp. pubis by forming an arched border called **Arcuate** Line



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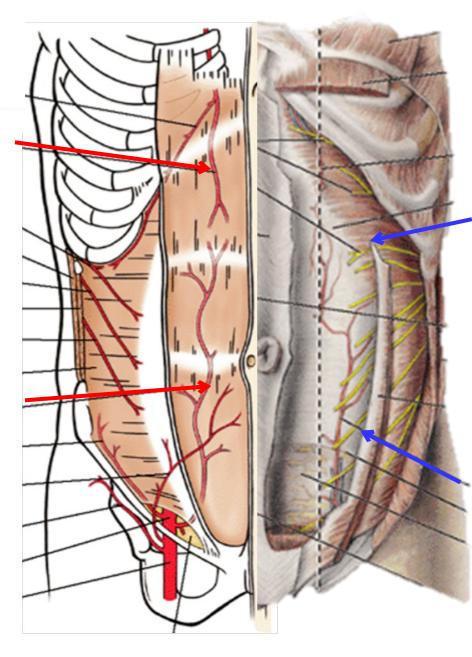
2 muscles2 arteries2 veins6 nerves

Rectus abdominus.

Pyramidalis muscle (if present).

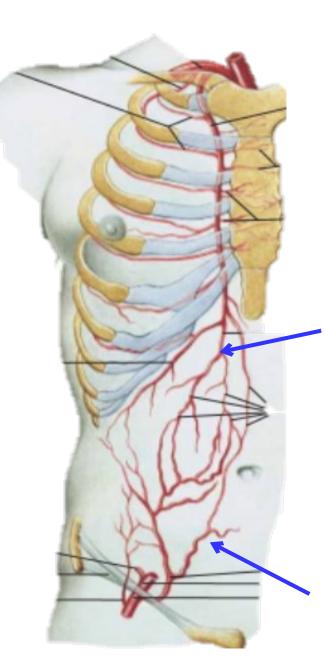
Superior and inferior epigastric arteries.

Anterior cutaneous branches of lower 5 intercostal nerves and subcostal nerve.



#### Arteries of anterior abdominal wall (Fig.16)

	(1) Superior epigastric artery	(2) Inferior epigastric artery
Origin	one of terminal branches of	external iliac artery near its
	the internal thoracic artery	lower end.
how enters	by passing behind the 7 <sup>th</sup>	just medial to the deep inguinal
the sheath	costal cartilage between the	ring, pierces fascia transversalis
	costal & xiphoid origins of	at the lateral border of rectus
	the diaphrgm, crossing the	abdominis & enters rectus
	upper border of TA.	sheath by passing in front of the
		arcuate line.
Course	within the sheath it runs	within the sheath it runs
	vertically downwards.	vertically upwards.
	Both supply the rectus muscle, & ends by anastomosing with	
	each other.	
Branches	- muscular.	- muscular.
	- cutaneous	- cutaneous
	- hepatic branch which runs	- cremasteric branch to the
	in the falciform ligament	spermatic cord.
	- anastomatic branch.	- pubic branch.



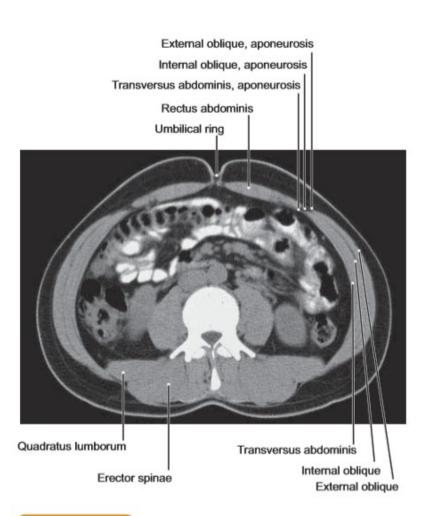


FIGURE 229.2 Computed Tomography (CT) of the Muscles of the Abdomen at the Level of the Umbilicus

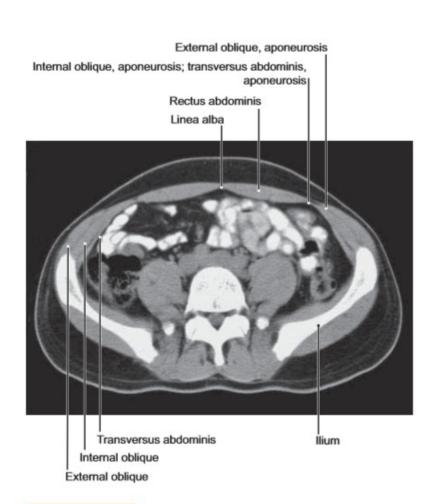


FIGURE 229.3 CT of the Muscles of the Abdomen at the Level of the Fifth Lumbar Vertebra

#### INNERVATION OF ANT. ABD. WALL

- External oblique, internal oblique, transversus abdominis
  - by lower six thoracic nerves + iliohypogastric & ilioinguinal n (L1)
- Rectus abdominis [] lower six thoracic nerves
- Pyramidalis: by T12
- Cremasteric muscle: by genital branch of genitofemoral n. (L1).

#### **ACTION OF ANT. ABD. WALL MUSCLES:**

- Support abdominal contents.
- Expiration.
- Expulsive acts as vomiting, micturition, defecation, labour.
- Movements of the trunk:

Flexion of the trunk [] rectus abdominis

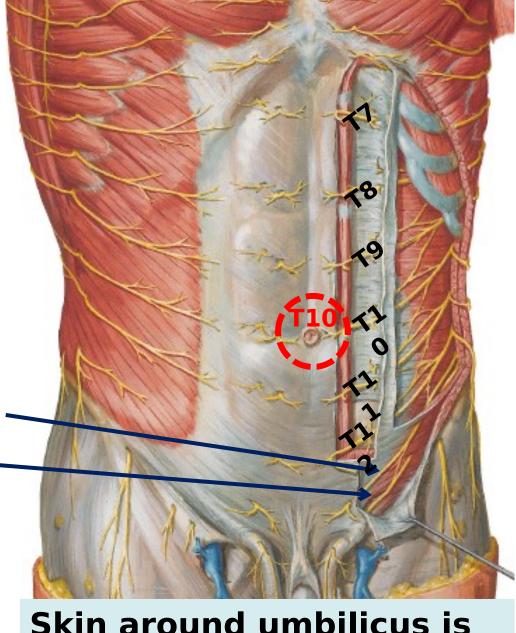
Lat. flexion & rotation of the trunk 

| the 2 obliques

- Pyramidalis: tenses linea alba.
- Cremasteric: suspends & elevates the testis.

## Nerves of anterior abdominal wall:

- Ant. abd. wall is supplied by ventral rami of lower 6 thoracic nerves & L1
- Lower 6 thoracic nerves run in the neurovascular plane then enter the rectus sheath
- □L1 is represented by 2 nerves:
  - iliohypogastric & ilioinguinal.
- □These 2 nerves have rof ¬2 special features:



Skin around umbilicus is supplied by T10

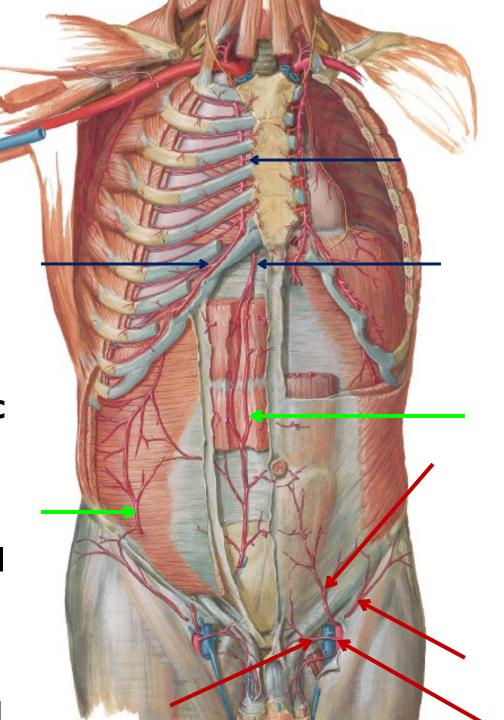
**Arteries of anterior abdominal wall:** 

2 arteries from internal thoracic
 superior epigastric
 & musculophrenic

2 arteries from external iliac [] inferior epigastric & deep circumflex iliac

□ 3 brs from descending thoracic aorta □ 10,11,12 posterior intercostal

□ 3 brs from femoral artery superficial external

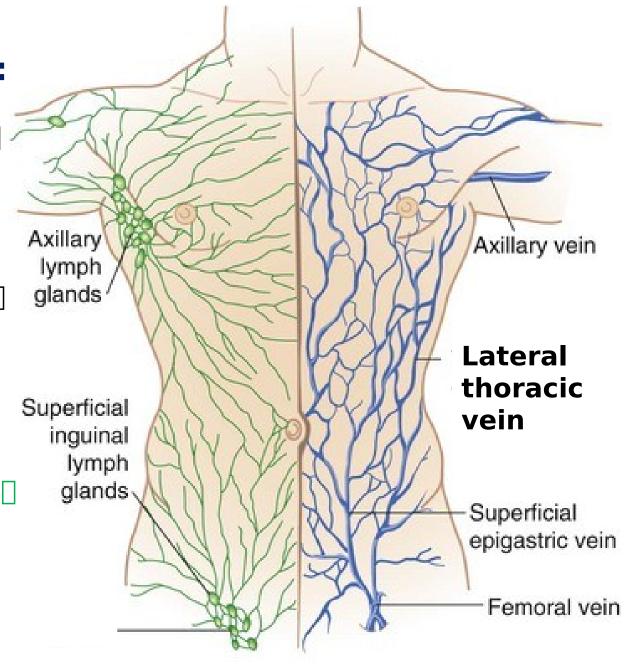


## Superficial veins of ant. abd. wall:

- ▶ Above umbilicus ☐ lat. thoracic vein ☐ axillary v
- Below umbilicus []
   veins accompany
   superficial
   inguinal arteries []
   Great saphenous
   vein

Superficial Lymphatics of ant. abd. wall:

- ➢ Above umbilicus ☐ axillary L.N.



#### **Lecture Quiz**



Question 1 Enumerate contents of rectus sheath

Question 2 Describe anterolateral muscles present in anterior abdominal wall

#### **SUGGESTED TEXTBOOKS**



Clinical Anatomy for Medical Students .Richard S. Snell

Gray's anatomy for students . Page 245-251